### **Benefit Design Questions and Answers**

## Emergency room use

What percent of our members visit the ER?

- 11.6 percent of our HMO basic plan and PERS Choice basic plan members visited the emergency room in 2005
- 9 percent of our HMO basic plan and PERS Choice basic plan members visited the emergency room and were not admitted to the hospital in 2005

### Urgent care copayment adjustment

In terms of refining and targeting co-payments, could we exclude those counties without urgent care facilities?

Staff asked each of our HMO health plans and PERS Choice if they could charge a different emergency room co-payment in counties where urgent care is not available. All of our plans cited administrative difficulties in implementing different co-payments and none are able to accommodate the request.

# Urgent care availability

What can patients do when urgent care centers are not available?

There are several actions patients can take for a non-life threatening condition when urgent care centers are not available:

- 1. Call the 24-hour advice nurse line to assess the urgency of the condition.
- 2. Call the primary care doctor's office, and the doctor's answering service will connect the patient to the doctor-on-call. The doctor-on-call will be able to:
  - Provide you with over-the-phone advice
  - Communicate with your primary care office to make sure you are seen the next day, if indicated
  - Refer you to an emergency room or admit you to a hospital if symptoms warrant
- 3. Wait until the urgent care center is open the next day, if condition does not need immediate attention.

For a life-threatening condition, patients should go to the emergency room. If admitted, the emergency room co-payment would be waived.

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## Benefit Design Questions and Answers, Continued

## Generic substitutes

What if there is no generic substitution available for a prescribed brand drug?

Even though some drugs have no generic substitutes, there are often generic substitutes for another brand drug belonging to the same therapeutic category.

For example, Aceon is a brand angiotensin-converting enzyme (ACE) inhibitor drug that treats hypertension. Although Aceon has no generic substitute, there are many other ACE inhibitors with generic substitutes, such as Accupril (generic: quinapril) or Lotensin (generic: benazepril).

#### Pharmacy copayment and utilization

Is there any study showing that pharmacy co-payment increases of brand prescription drugs change patient utilization of generic drugs?

For this analysis, CalPERS relied on research conducted by its actuarial consultant, Milliman. Milliman conducts annual research on prescription drug utilization, using complete claims information for about 10-15 commercially insured members, and additional prescription-drug specific data from several Pharmacy Benefit Managers. Milliman finds that the percentage of generic drugs used by a commercial population depends on a variety of factors. Their research suggests that an increase in the spread between the generic and brand co-payment from \$10 (\$5 generic versus \$15 brand) to \$15 (\$5 generic versus \$20 brand) will increase CalPERS' generic use percentage by 1.5-2%.

#### Preventive care

What is the definition of "preventive care"? What services are included as preventive care?

According to the Milliman Report, preventive care includes the following services:

- periodic health exams (and associated routine tests, based on age and standard protocol)
- periodic maternity care and pre/post-natal care
- well baby visits
- allergy testing and treatment
- immunizations
- hearing evaluations

The attached table shows general preventive care guidelines for healthy children, adolescent, adults, and seniors, based on the U.S. Preventive Services Task Force *Guide to Preventive Services*. Your primary care doctor may modify these guidelines based on your health and history or individual risk factors.)

| General Preventive Care Guidelines   |   |   |  |
|--|---|---|--|
| Children (birth to age 10)   | Adolescents (age 11-24 years)   | Adults (age 25-64 years)  | Seniors (age 65 and older)   |
| Periodic health exam,<br>post-natal care, well baby<br>visit   | Periodic health exam  | Periodic health exam  | Periodic health exam   |
| Height, weight, newborn<br>hearing, vision screening,<br>vision impairment, and<br>hearing evaluations   | Height, weight, and hearing evaluations   | Height, weight, and hearing evaluations   | Height, weight, hearing impairment, visual acuity, and hearing evaluations   |
| Blood pressure   | Blood pressure  | Blood pressure, EKG   | Blood pressure, EKG  |
| Hemoglobin / hematocrit,<br>CBC with differential  | CBC with differential   | CBC with differential   | CBC with differential  |
| Test for thyroid activity,<br>galactose metabolism<br>disorder, blood disorder,<br>phenylketonuria level,<br>chemistry panel,<br>chemistry panel | Lipid panel,<br>chemistry panel   | Lipid panel, chemistry panel, bone densitometry   | Lipid panel, chemistry panel, bone densitometry  |
|  | Women: Pap test, Chlamydia test, screening for rubella susceptibility by history of vaccination or serologic tests for antibodies, periodic maternity care (for pregnant women) | Women: Pap test, Chlamydia test, screening for rubella susceptibility by history of vaccination or serologic tests for antibodies, mammography, breast examination, periodic maternity care and prenatal care (for pregnant women), hormone replacement therapy (for pre- and postmenopausal women) | Women: Pap test, mammography and breast examination  |
|  |   | Men:<br>Prostate cancer screening (PSA test)  | Men:<br>Prostate cancer screening (PSA test)   |
|  | Skin cancer screening   | Colorectal cancer screening<br>(fecal occult blood test and/or<br>sigmoidoscopy, colonoscopy<br>or double contrast barium<br>enema), skin cancer screening  | Colorectal cancer screening (fecal occult blood test and/or sigmoidoscopy, colonoscopy or double contrast barium enema), skin cancer screening |
| Tuberculosis screening   | Tuberculosis screening  | Tuberculosis screening, sexually transmitted diseases   | Tuberculosis screening   |
| Hepatitis C screening  | Hepatitis C screening   | Hepatitis C screening   | Hepatitis C screening  |
| Allergy testing and treatment  | Allergy testing and treatment   | Allergy testing and treatment   | Allergy testing and treatment  |
| Immunizations (including<br>all childhood<br>immunizations<br>recommended by<br>American Academy of<br>Pediatrics)                               | Immunizations<br>(including flu shot<br>and Td booster)   | Immunizations (including flu shot and Td booster)   | Immunizations (including flu shot Td booster)  |